Reserved for date stamp



PLACER COUNTY PLANNING DEPARTMENT AUBURN OFFICE TAHOE OFFICE

11414 B Avenue Auburn, CA 95603 530-886-3000/FAX 530-886-3080 **Web page:** www.placer.ca.gov/planning 565 W. Lake Blvd/PO Box 1909 Tahoe City CA 96145 530-581-6280/FAX 530-581-6282 **E-Mail**: planning@placer.ca.gov

REQUEST FOR EXTENSION OF TIME

----TO BE COMPLETED BY THE APPLICANT-----

1.	Project Name			
2.	Developer (if applicable)	Tel	Tele.#	
	Mailing Address	City/State	Fax #	
	Engineer (if applicable)	Te	Tele.#	
	Mailing Address	City/State	Fax #	
3.	Type of Project and Application Number (CUF	P, SUB, VAA, DSA, MLD, etc.)		
4.	Are there any other applications associated with	h this project? Yes No		
	If yes, list application type and number:			
5.	This is the (first/second/third) request for an extension of time (circle one). How much time is requested?			
6.	The project was originally approved on			(date
7.	The current project approval will expire on			(date
NO	TE: As Extensions of Time are considered, th	e approving body may modify or add cor	nditions of approval	to reflect
cur	rent County policy.			
		SIGNATURE OF APPLICANT		DATE
DA	TE OF HEARING BODY'S ACTION:			
Ap	proved Denied Summ	nary/Conditions of Approval:		
SIC	SNATURE OF HEARING OFFICER/CLERK	DATE		